

# MEDICAID ELIGIBILITY

GROUP	BENEFITS	BASIC REQUIREMENTS **						SPECIAL PROVISIONS (updated 0713)
		Basic Eligibility Requirement	Whose Income and Resources Count	Income Limit (updated 04/13)	Resource Limit (updated 01/13)	Deductible/ Spend down		
Beneficiaries of Cash Assistance Programs  AAF, S-ABD, MSB SSI cases	Full Medicaid coverage	Beneficiaries of the following cash assistance programs are automatically entitled to Medicaid. No separate Medicaid application or Medicaid eligibility determination is required. The cash assistance programs are: <ul style="list-style-type: none"><li>• Work First Family Assistance – NC program under the federal Temporary Assistance to Needy Families law that provides cash assistance to families with children.</li><li>• Supplemental Security Income (SSI) – Federal cash assistance program for the aged, blind, and disabled.</li><li>• State/County Special Assistance – State cash assistance program for aged and disabled individuals, primarily who are in adult care homes.</li><li>• Special Assistance to the Blind – State cash assistance program for blind individuals.</li></ul>						
Aged MAA	Full Medicaid Coverage	Age 65 or older	Spouse's income and resources if live together	100% of Poverty 1 – \$ 958/mo 2 – \$1,293 /mo	SSI Limits 1 - \$2,000 2 - \$3,000	Yes	If income exceeds income limit and the indicator is “yes,” the individual or family may be able to be eligible for Medicaid if they can meet a deductible. See discussion of <u>Medical Deductible</u> on page 2 of this same column.  <b>Individuals in nursing facilities</b> generally do not have to meet a deductible to be eligible for Medicaid. However, they must pay all of their monthly income, less a \$30 personal needs allowance and the cost of medical expenses not covered by Medicaid or other insurance to the nursing facility. Medicaid pays the remainder of their cost of care.  <b>Protection of income for spouse at home:</b> When an individual is in a nursing facility and has a spouse living at home, a portion of the income of the spouse in the facility may be protected to bring the income of the spouse at home up to a level specified by federal law. Currently, that amount is \$1,939/mo and can be as much as \$2,898 depending upon at-home spouse's cost for housing. The amount protected for the at-home spouse is not counted in determining the eligibility of the spouse in the nursing facility.  <b>Protection of resources for spouse at home:</b> Additionally, the countable resources of the couple are combined and a portion is protected for the spouse at home. That portion is ½ the total value of the countable resources, but currently not less than \$23,184 or more than \$115,920. The amount protected for the at-home spouse is not countable in determining the eligibility of the spouse in the facility.  <b>Transfer of resources:</b> When a person gives away resources and does not receive compensation with a value at least equal to that of the resources given away, he may be penalized. Medicaid will not pay for care in a nursing facility or care provided under the Community Alternative Placement program or other in-home health services & supplies for a period of time that depends on the value of the transferred resource.	
Blind MAB	Full Medicaid Coverage	Blind by Social Security Standards	Spouse's income and resources if live together. Parents' income and resources if under age 18 and live with parents.	100% of Poverty 1 – \$ 958/mo 2 – \$1,293 /mo	SSI Limits 1 - \$2,000 2 - \$3,000	Yes		
Disabled MAD	Full Medicaid Coverage	Disabled by Social Security Standards	Spouse's income and resources if live together. Parents' income and resources if under age 18 and live with parents.	100% of Poverty 1 – \$ 958/mo 2 – \$1,293 /mo	SSI Limits 1 - \$2,000 2 - \$3,000	Yes		
Health Care for Working Disabled (HCWD) MAD	Full Medicaid Coverage	<b>* See Footnote</b>	Spouse's income and resources if live together. Parents' income and resources if under age 18 and live with parents.	150% of Poverty 1- \$1,437 2- \$1,939	Min. CSRP limit \$23,184	No		
Qualified Medicare Beneficiaries MQB-Q	Payment of Medicare premiums and deductibles and co-insurance charges for Medicare covered services	Entitled to Medicare Parts A & B	Spouse's income and resources if live together. Parents' income and resources if under age 18 and live with parents.	100% of Poverty 1 – \$ 958/mo 2 – \$1,293 /mo	1 - \$7,080 2 - \$10,620	No		
Specified Low Income Medicare Beneficiaries MQB-B	Payment of Medicare Part B premium	Entitled to free Medicare Part A	Spouse's income and resources if live together. Parents' income and resources if under age 18 and live with parents.	120% of Poverty 1 - \$1,149/mo 2 - \$1,551 /mo	1 - \$7,080 2 - \$10,620	No		
Qualifying Individual MQB-E	Payment of Medicare Part B Premiums	Entitled to free Medicare Part A	Spouse's income and resources if live together. Parents' income and resources if under age 18 and live with parents.	135% of Poverty 1 - \$1,283 mo 2 - \$1,745/mo	1 - \$7,080 2 - \$10,620	No		
	<b>NOTE:</b> Total number of eligible individuals is limited to available funds.							
Working Disabled  MWD	Payment of Medicare Part A premiums	Lost entitlement to free Medicare A due to earnings but still has disabling impairment.	Spouse's income and resources if live together. Parents' income and resources if under age 18 and live with parents.	200% of Poverty 1 - \$1,915/mo 2 - \$2,585/mo	2X SSI Limits 1 - \$4,000 2 - \$6,000	No		

\* For Basic Coverage, the beneficiary does not have to meet the Social Security SGA requirement to be disabled. For Medically Improved coverage, the beneficiary does not have to meet the Social Security medical requirements for disability.

GROUP	BENEFITS	BASIC REQUIREMENTS **						SPECIAL PROVISIONS (updated 04/13)
		Basic Eligibility Requirement	Whose Income and Resources Count	Income Limit (update 4/13)	Resource Limit (updated 01/13)	Deductible/Spend down		
Families & Children  MAF-N/C/M	Full Medicaid coverage	Parents/Caretaker relatives must be living with and caring for a child to whom they are related who is under age 19.  Children must be under age 21.	Spouse's income and resources if live together.  Parents' income and resources if under age 21 and live with parents.	1 - \$362/mo 2 - \$472/mo 3 - \$544/mo 4 - \$594/mo 5 - \$648/mo	\$3,000	Yes	If income exceeds income limit and the indicator is "yes" the individual or family may be able to be eligible for Medicaid if they he can meet a deductible  <b>Medicaid Deductible:</b>	Children with special needs who are adopted under state adoption agreements have their eligibility for Medicaid determined without counting the income of the adoptive parents.
Pregnant Women  MPW	Coverage is limited to treatment for conditions that affect the pregnancy.	Medical verification of pregnancy	Count only the income of the pregnant woman and her spouse if married.	185% of Poverty 1 - \$1,772/mo 2 - \$2,392 /mo 3 - \$3,011/mo 4 - \$3,631 /mo 5 - \$4,251/mo	No resource limit if eligible with income no more than 185% of poverty	Yes	When an individual/family is ineligible for Medicaid due to income over the income limit, they may become eligible by meeting a Medicaid deductible. The deductible is determined by subtracting the Medically Needy Income Limit (MNIL) (see <i>limits below</i> ) from the countable monthly income to determine the monthly excess income. Medicaid deductibles are generally determined for 6 months, so the monthly excess income is multiplied by 6 to determine the 6-mo.	When determining the family size for the pregnant woman the unborn child is included. For example the family size for a single pregnant woman would be 2.
Children under age 6 MIC-1	Full Medicaid Coverage	Be under age 6.	Parents' income if living in the home.	200% of Poverty 1 - \$1,915/mo 2 - \$2,585/mo 3 - \$3,255/mo 4 - \$3,925/mo 5 - \$4,595/mo	No resource limit if eligible with income no more than 200% of poverty	Yes	deductible. Once medical bills for which they are responsible totaling the amount of the deductible are incurred, they are authorized for the rest of the 6-mo. period. Medicaid cannot pay for any of the bills applied to the deductible.	
Children age 6 thru 18  MIC-N	Full Medicaid Coverage	Be age 6 thru age 18	Parents' income if living in the home.	100% of Poverty 1 - \$ 958/mo 2 - \$1,293/mo 3 - \$1,628/mo 4 - \$1,963/mo 5 - \$2,298/mo	No resource limit if eligible with income no more than 100% of poverty.	Yes		
Title IV-E Children IAS	Full Medicaid Coverage	Be an Title IV-E adoptive or foster child	Medicaid eligibility is automatic. There is no income or resource determination.			No	<b>MNIL:</b> 1 - \$242/mo 2 - \$317/mo 3 - \$367/mo 4 - \$400/mo 5 - \$433/mo  <b>Resource limit:</b> All deductible cases have a resource limit: \$3000 for families and children and \$2,000 (1) and \$3000 (2) for aged, blind and disabled.	
State Foster Care Children (HSF)	Full Medicaid Coverage	State Foster Care Children are evaluated as Families and Children's Group above. (If not eligible for HSF, then evaluate for other children's programs.)				Yes		
Expanded Foster Care HSF, IAS	Full Medicaid Coverage	Be 18-20 and had been a Title IV-E or State foster child on 18 <sup>th</sup> birthday	None	None	None	No		
Breast & Cervical Cancer Medicaid MAF-W	Full Medicaid Coverage	A woman who has been screened and enrolled in the NC Breast &Cervical Cancer Control Program and is otherwise ineligible for Medicaid	Medicaid eligibility is automatic. There is no income or resource determination.			No		To be eligible under the Breast and Cervical Cancer Medicaid program, the woman can have no medical insurance coverage including Medicare.

GROUP	BENEFITS	BASIC REQUIREMENTS **						SPECIAL PROVISIONS (updated 04/13)
		Basic Eligibility Requirement	Whose Income and Resources Count	Income Limit (update 4/13)	Resource Limit	Deductible/Spend down		
Family Planning MAF-D	Family Planning exams & services. Screening & treatment for STI. Screenings for HIV. Sterilizations.	Women age 19 thru 55 Men age 19 thru 60 Not otherwise eligible for Medicaid	Count spouse's income. Do not count parent's income for children.	185% of Poverty 1 - \$1,772/mo 2 - \$2,392/mo 3 - \$3,011/mo 4 - \$3,631/mo 5 - \$4,251mo	No resource limit	No	There is no deductible or spend down provision for Family Planning coverage. If a beneficiaries income increases to more than 185%, he will be ineligible for family planning coverage	
NC Health Choice (NCHC)	Medicaid-equivalent coverage with four exceptions: no long-term care, no EPSDT, no non-emergency medical transportation, and restricted dental.	Be age 6 through 18, ineligible for Medicaid, Medicare, or other federal government-sponsored health insurance, be uninsured, a NC resident, be in a household with 101-200% FPL, and pay enrollment fee when applicable.	Parents' income if living in the home.	200% of Poverty 1 - \$1,915/mo 2 - \$2,585/mo 3 - \$3,255/mo 4 - \$3,925/mo 5 - \$4,596/mo	No resource limit	No	There is no deductible or spend down provision for NCHC.	Beneficiaries with household income from 101-150% of FPL are exempt from the enrollment fee and have lower cost sharing obligations.  1 - \$1,437 2 - \$1,939 3 - \$2,442 4 - \$2,944 5 - \$3,447

\*\*This chart addresses benefits and basic eligibility requirements. Other requirements (such as citizenship/alien status, incarceration, & state residence) which can also affect eligibility or the level of benefits are not reflected on this chart.